PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

106826/3

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			.4			,		RATE	FEE	7	RATE	FEE
FC	DR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	廿 minus 20=		*			X\$ 9=		OR	X\$18=	
IND	DEPENDENT C	LAIMS	v m	inus 3 =	<u></u>			X43=		OR	X86=	
ΜL	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	e in column 1 is	less than ze	an zero, enter "0" in column 2			i	TOTAL	378	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)	<u> </u>	(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MI	JLIIPLE DEI	PENDENT	CLAIM		ן י	+145=		OR	+290=	
	1 3							TOTAL ADDIT. FEE		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)										ADDIT. FEE	
_		CLAIMS		HIGH	EST		Ìг	-	ADDI-	1		ADDI-
ENT E		REMAINING AFTER AMENDMENT		NUME PREVIC PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
AMENDMENT B	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		1	+145=		OR	+290=	
								TOTAL DDIT. FEE		L	TOTAL ADDIT. FEE	
		^	DDII. FEE L		,	ADDII. FEE						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIO PAID F	ST BER USLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	9 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Pr viously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL ADDIT. FEE	
		ber Previously Paid					r foun	id in the app	ropriate box	in colu	ımn 1.	